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NAME	FAX NO.	PHONE NO.
USPTO Mail Stop: Amendment	571-273-8300	
Group Unit: 2664		

FROM: Jacquelyn Campbell - 2279**RE: U.S. Patent Application No. 09/780979**
Data Communication Controller and Method
J. Howard Smith, et al.

CLIENT/MATTER NO.: 021404.0017US1	NUMBER OF PAGES, INCLUDING COVER: 4
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MESSAGE:**Please see the attached Revocation of Power of Attorney and New Power of Attorney.**
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PTO/SB/21 (07-06)

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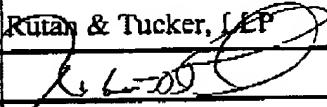
Application Number	09/780,979
Filing Date	February 9, 2001
First Named Inventor	J. Howard Smith
Art Unit	2664
Examiner Name	Shah, Chirag G.
Attorney Docket Number	021404.0017US1

ENCLOSURES (Check all that apply)

<input type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input type="checkbox"/> Amendment/Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Reply to Missing Parts/Incomplete Application <input type="checkbox"/> Reply to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input checked="" type="checkbox"/> Power of Attorney, Revocation <input type="checkbox"/> Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____ <input type="checkbox"/> Landscape Table on CD	<input type="checkbox"/> After Allowance Communication to TC <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below) Statement under 37 CFR 3.73(b)
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Remarks

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Firm Name	Rutan & Tucker, LLP		
Signature			
Printed name	Robert D. Fish		
Date	8/16/06	Reg. No.	33880

CERTIFICATE OF TRANSMISSION/MAILING

I hereby certify that this correspondence is being facsimile transmitted to the USPTO or deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on the date shown below

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Typed or printed name	Jacquelyn Campbell	Date	08/16/2006

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STATEMENT UNDER 37 CFR 3.73(b)

Applicant/Patent Owner: I. Howard Smith, et al.Application No./Patent No./Control No.: 09/780,979 Filed/Issue Date: 9 February 2001Entitled: Data Communication Controller and MethodLantronix, Inc.

(Name of Assignee)

a

Corporation

(Type of Assignee: corporation, partnership, university, government agency, etc.)

states that it is:

1. ☒ the assignee of the entire right, title, and interest, or
2. ☐ an assignee of less than the entire right, title and interest
(The extent (by percentage) of its ownership interest is _____%)

in the patent application/patent identified above by virtue of either

A. ☐ An assignment from the inventor(s) of the patent application/patent identified above. The assignment was recorded in the United States Patent and Trademark Office at Reel _____, Frame _____, or a true copy of the original assignment is attached

OR

B. ☒ A chain of title from the inventor(s), of the patent application/patent identified above, to the current assignee as follows:1. From: I. Howard Smith and Michael B. Justice To: Synergistic Micro Systems, Inc.The document was recorded in the United States Patent and Trademark Office at Reel 011818, Frame 0283, or for which a copy thereof is attached.2. From: Synergistic Micro Systems, Inc. To: Lantronix, Inc.The document was recorded in the United States Patent and Trademark Office at Reel 014798, Frame 0023, or for which a copy thereof is attached.

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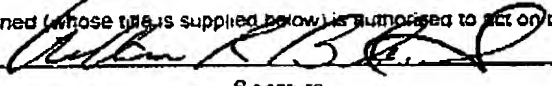
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☐ Additional documents in the chain of title are listed on a supplemental sheet.

As required by 37 CFR 3.73(b)(1)(i), the documentary evidence of the chain of title from the original owner to the assignee was, or concurrently is being, submitted for recordation pursuant to 37 CFR 3.11.

[NOTE: A separate copy (i.e., a true copy of the original assignment document(s)) must be submitted to Assignment Division in accordance with 37 CFR Part 3, to record the assignment in the records of the USPTO. See MPEP 302.08]

The undersigned (whose title is supplied below) is authorized to act on behalf of the assignee.



Signature

William Black

Printed or Typed Name

General Counsel

Title

8/16/06

Date

(949) 453-3990

Telephone Number

This collection of information is required by 37 CFR 3.73(b). The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process), an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.11 and 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450

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REVOCATION OF POWER OF ATTORNEY WITH NEW POWER OF ATTORNEY AND CHANGE OF CORRESPONDENCE ADDRESS	Application Number	09/780979
	Filing Date	02/09/2001
	First Named Inventor	J. Howard Smith
	Art Unit	2664
	Examiner Name	Shah, Chirag G.
	Attorney Docket Number	021404.0017US1

I hereby revoke all previous powers of attorney given in the above-identified application.

☐ A Power of Attorney is submitted herewith.

OR

☒ I hereby appoint the practitioners associated with the Customer Number 34284

☒ Please change the correspondence address for the above-identified application to:

☒ The address associated with Customer Number: 34284

OR


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I am the:

☐ Applicant/Inventor.

☒ Assignee of record of the entire interest. See 37 CFR 3.71
Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96)

SIGNATURE of Applicant or Assignee of Record

Signature			
Name	William Black		
Date	<u>8/16/06</u>	Telephone	(949) 453-3990

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.

☐ Total of _____ forms are submitted.

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